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PATENT TRADEMARK OFFICE

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CHECK ONE:

DECLARATION AND POWER OF ATTORNEY

ORIGINAL APPLICATION

DOCKET No. GC712

AS A BELOW NAMED INVENTOR, I HEREBY DECLARE THAT:

DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS §1.56.

MY RESIDENCE, POST OFFICE ADDRESS AND CITIZENSHIP ARE AS STATED BELOW NEXT TO MY NAME. I BELIEVE I AM THE ORIGINAL, FIRST AND SOLE INVENTOR (IF ONLY ONE NAME IS LISTED BELOW) OR AN ORIGINAL, FIRST AND JOINT INVENTOR (IF PLURAL NAMES ARE LISTED BELOW) OF THE SUBJECT MATTER WHICH IS CLAIMED AND FOR WHICH A PATENT IS SOUGHT ON THE INVENTION ENTITLED **A** PROCESS FOR HYDROLYZING STARCH WITHOUT PH ADJUSTMENT, THE SPECIFICATION OF WHICH

IS ATTACHED HERETO	
WAS FILED ON	_ AS APPLICATION SERIAL NO
I HEREBY STATE THAT I HAVE REVIEWED	O AND UNDERSTAND THE CONTENTS OF THE ABOVE IDENTIFIED
SPECIFICATION, INCLUDING THE CLAIMS	S, AS AMENDED BY ANY AMENDMENT REFERRED TO ABOVE. I
ACKNOWLEDGE THE DUTY TO DISCLOSE	E INFORMATION WHICH IS MATERIAL TO PATENTABILITY AS

I HEREBY CLAIM FOREIGN PRIORITY BENEFITS UNDER TITLE 35, UNITED STATES CODE §119, OF ANY FOREIGN APPLICATION(S) FOR PATENT OR INVENTOR'S CERTIFICATE LISTED BELOW AND HAVE ALSO IDENTIFIED BELOW ANY FOREIGN APPLICATION FOR PATENT OR INVENTOR'S CERTIFICATE HAVING A FILING DATE BEFORE THAT OF THE APPLICATION ON WHICH PRIORITY IS CLAIMED.

			PRIORITY CLAIMED
APPLICATION NUMBER	COUNTRY	DATE OF FILING	YES NO
NA			

I HEREBY CLAIM THE BENEFIT UNDER TITLE 35, UNITED STATES CODE §120, OF ANY UNITED STATES APPLICATION(S) LISTED BELOW AND, INSOFAR AS THE SUBJECT MATTER OF EACH OF THE CLAIMS OF THIS APPLICATION IS NOT DISCLOSED IN THE PRIOR UNITED STATES APPLICATION IN THE MANNER PROVIDED BY THE FIRST PARAGRAPH OF TITLE 35, UNITED STATES CODE §112, I ACKNOWLEDGE THE DUTY TO DISCLOSE MATERIAL INFORMATION AS DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS §1.56(A) WHICH OCCURRED BETWEEN THE FILING DATE OF THE PRIOR APPLICATION AND THE NATIONAL OR PCT INTERNATIONAL FILING DATE OF THIS APPLICATION.

APPLICATION NUMBER	DATE OF FILING	STATUS - PATENTED, PENDING OR ABANDONED
NA		

POWER OF ATTORNEY: AS A NAMED INVENTOR I HEREBY APPOINT AS MY ATTORNEY(S) WITH FULL POWER OF SUBSTITUTION AND REVOCATION, TO PROSECUTE THIS APPLICATION AND TRANSACT ALL BUSINESS IN THE PATENT AND TRADEMARK OFFICE CONNECTED THEREWITH:

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MARGARET A. HORN, REG. NO. 33,401 CHRISTOPHER L. STONE, REG. NO. 35,696 RICHARD T. ITO, REG. NO. 32,242 VICTORIA L. BOYD, REG. NO. 43,510 JANET KAISER CASTANEDA, REG. NO. 33,228 H. THOMAS ANDERTON, IR. REG. NO. 40,895

	H. THOMAS ANDERTON	, JK.,	, REG. NO). 40,095				
SEND CORRESPONDENCE TO:		0	DIRECT TELEPHONE CALLS TO:					
JANET KAISER CASTANEDA			(650) 846-4072					
GENENCOR INTERNATIONAL, INC.		10						
925 PAGE MILL ROAD		ļ						
PALO ALTO, CA 94304	L-1013							
201								
FULL NAME OF INVENTOR	FULL FIRST NAME		INITIAL	LAST NAM	LAST NAME			
TO DETAINE OF THE PERSON	JAYARAMA		K.	SHETTY				
RESIDENCE & CITIZENSHIP	CITY	STA		IGN COUNTRY	OUNTRY COUNTRY OF CITIZENSHIP			
	PLEASANTON	1		ALIFORNIA		U.S.A.		
POST OFFICE ADDRESS	POST OFFICE ADDRESS		CITY		s	TATE OR COUNTRY	ZIP CODE	
	4806 BRANTON PLACE		PLEASA	NOTV	С	ALIFORNIA	94566	
202								
FULL NAME OF INVENTOR	FULL FIRST NAME		INITIAL	LAST NAM	E			
	ERIC		C.	SINGLEY				
RESIDENCE & CITIZENSHIP	CITY	STA	TATE OR FOREIGN COUNTRY		, —	COUNTRY OF CITIZENSHIP		
	EDWARDSBURG	EDWARDSBURG MIC		CHIGAN		U.S.A.		
POST OFFICE ADDRESS		POST OFFICE ADDRESS		CITY		TATE OR COUNTRY	ZIP CODE	
	65661 DAILEY ROAD EDWARDSBURG MICHIGAN 4911			49112				
203								
FULL NAME OF INVENTOR	FULL FIRST NAME	i	NITIAL	LAST NAME				
				A. STROHM				
RESIDENCE & CITIZENSHIP	1	CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENS		SHIP				
POOT OFFICE APPRESS				DIANA		U.S.A.		
POST OFFICE ADDRESS	58573 GLENRIVER DRIVE	1				STATE OR COUNTRY ZIP CODE INDIANA 46528		
204	30373 GLENRIVER DRIVE		SUSHEN		IIVE		40026	
FULL NAME OF INVENTOR	FULL FIRST NAME		INITIAL	LAST NAM				
TOLE NAME OF HAVENTON	7 OLE I IKO I WANE		INCLOSE	LAGI WAW	-			
RESIDENCE & CITIZENSHIP	CITY	STA	TE OR FORE	IGN COUNTRY	,	COUNTRY OF CITIZE	NSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS		CITY		s	TATE OR COUNTRY	ZIP CODE	
205								
FULL NAME OF INVENTOR	FULL FIRST NAME		INITIAL	LAST NAMI	E			
DESIDENCE 9 APPLEADORS	Torry	T ==:				7 -2		
RESIDENCE & CITIZENSHIP	CITY	STA	NE OR FORE	IGN COUNTRY	,	COUNTRY OF CITIZE	NSHIP	
POST OFFICE ADDRESS	POST OFFICE ADDRESS	Д	CITY		10	TATE OR COUNTRY	ZIP CODE	
1 001 OFFICE ADDRESS	FOOT OFFICE ADDRESS		1011		1 °	IAIL OR COUNTRY	ZIF CODE	
					_!			

I FURTHER DECLARE THAT ALL STATEMENTS MADE HEREIN OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE, AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION OR ANY PATENT ISSUING THEREON.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202
DATE	DATE
SIGNATURE OF INVENTOR 203	SIGNATURE OF INVENTOR 204
DATE	
SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE

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